



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 125400002

CITY OR TOWN SUTTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DUDLEY-GENDRON POST#414 AM.LEG.DEPT.OF MA.INC

DOING BUSINESS A

ADDRESS 156 BOSTON ROAD

CITY/TOWN: SUTTON

STATE: MA

ZIP CODE: 01590

MANAGER: KRUMSIEK, MARYTYPE OF LICENSE: Veterans club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE-STORY BLDG.

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY:

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



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APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: SUTTON WINES & LIQUORS, INC.

DOING BUSINESS AS SUTTON LIQUORS

ADDRESS 00017A PROVIDENCE TPK

CITY/TOWN: SUTTON

STATE: MA

ZIP CODE: 01590

MANAGER: ALLARD,
VINCENT

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

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DESCRIPTION OF LICENSED PREMISES:

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DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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LICENSE NUMBER: 125400015

CITY OR TOWN SUTTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: MELISSA DACOSTA & ALBINO DACOSTA

DOING BUSINESS AS NICK'S COUNTRY MARKET

ADDRESS 3 BOSTON ROAD

CITY/TOWN: SUTTON

STATE: MA

ZIP CODE: 01590

MANAGER: ALBINO DACOSTA TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

PREMISES CONSIST OF 40'X40' SPACE IN THE HERITAGE MALL W/BASEMENT FOR
STORAGE AREA AND FRONT AND REAR EXITS.

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DATE:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 125400016

CITY OR TOWN SUTTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: ANTONIOS DRAKAKIS

DOING BUSINESS AS TONY'S SUTTON PIZZA

ADDRESS 146 WORC-PROV. RD.

CITY/TOWN: SUTTON

STATE: MA

ZIP CODE: 01590

MANAGER:

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY BLDG. W/BASEMENT; 1ST. FLOOR-KITCHEN, DINING ROOM W/2 ENTRANCES,
COUNTER AREA, REAR ENTRANCE INTO KITCHEN; BASEMENT-STAIRS TO 1ST. FLOOR,
WALKOUT TO PARKING LOT, DINING ROOM, STORAGE AREA.

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DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 125400020

CITY OR TOWN SUTTON

APPLICATION FOR RENEWAL:

Annual

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CLASS

YEAR

LICENSEE NAME: ESSEX GOLF GROUP

DOING BUSINESS AS BLACKSTONE NATIONAL GOLF CLUB

ADDRESS 227 PUTNAM HILL RD

CITY/TOWN: SUTTON

STATE: MA

ZIP CODE: 05190

MANAGER: GORDON,
MICHAEL C.

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

2 STORY BLDG. FIRST FLOOR WILL SERVE AS A RESTAURANT WITH A BAR, SECOND FLOOR WILL BE OFFICE SPACE

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EMPLOYER IDENTIFICATION NUMBER:

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OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER: 125400021

CITY OR TOWN SUTTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: AKSHAR VARIETY, INC

DOING BUSINESS A

ADDRESS 1 MAIN STREET

CITY/TOWN: SUTTON

STATE: MA

ZIP CODE: 01526

MANAGER: PATEL, VIJAY

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE FLOOR, TWO EXITS, WALK IN COOLER, COUNTER SPACE, SHELVEING, ATANDARD COOLERS.

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Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 125400022

CITY OR TOWN SUTTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: SUTTON CENTER COUNTRY STORE, LLC

DOING BUSINESS AS SUTTON CENTER COUNTRY STORE

ADDRESS 3 SINGLETARY AVE

CITY/TOWN: SUTTON

STATE: MA

ZIP CODE: 01590

MANAGER: CONNOR,
WILLIAM B.

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

APPROX 1450 SQ FEET AND FOUR GAS PUMPS. BEER STORED IN COOLERS

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TELEPHONE NUMBER:

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LICENSE NUMBER: 125400023

CITY OR TOWN SUTTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: DRAKE PETROLEUM CO INC

DOING BUSINESS A SUTTON XTRA MART

ADDRESS 27 WORCESTER PROVIDENCE HIGHWAY

CITY/TOWN: SUTTON

STATE: MA

ZIP CODE: 01590

MANAGER: KANE, SEAN

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

CONVENIENCE STORE, GAS STATION

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 125400024

CITY OR TOWN SUTTON

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: PV FOOD & BEVERAGE SERVICES, LLC

DOING BUSINESS AS

ADDRESS 95 ARMSBY ROAD

CITY/TOWN: SUTTON

STATE: MA

ZIP CODE: 01590

MANAGER: SHROPSHIRE, ELIZABETH TYPE OF LICENSE: General on
premise

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

SEE ATTACHED FLOOR PLANS, LICENSEE WILL ALSO PROVIDE ALCOHOLIC BEVERAGE SERVICES TO GOLF PATRONS WITH IN BOUNDARY OF THE PROPERTY.

I hereby certify and swear under penalties of perjury that:

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